

SAWYER

Contact Division File.

**CUSTODIAL UNIT/LOCATION:** \_\_\_\_\_

DELETIONS, IF ANY: \_\_\_\_\_

[illegible]

CONTACT DIV

CONFIDENTIAL

04 DEC 1978

MEMORANDUM FOR: DDO/INS/IG/EIR

FROM : M. L. Latta  
Plans and Review Group  
Central Cover Staff (C)

SUBJECT : House Select Committee on Assassinations  
(HSCA) Request (U)

REFERENCE : Letter for OLC fr Chief Counsel/Director  
of HSCA (OLC #78-3481/3), dtd 28 Nov 78

1. In response to the request contained in Reference, CCS files contain the following information on Samuel G. Kail, Lt. Colonel, U.S. Army. (C)

a. One completed but undated DOJ/INS form G-410 (Employee Qualifications-Skills Inventory); unclassified. (U)

b. One U.S. Army Travel Order, dated 26 Jan 62; unclassified. (U)

2. Although the above documents are unclassified, the fact that Subject was affiliated with the Agency should be treated as CONFIDENTIAL because he was on covert detail to the Agency from 1962-66. (C)

/s/ M. L. Latta

M. L. Latta (C)

ORIGINAL CL BY 026089  
☐ DECL ✓ REVW ON 04 DEC 98  
EXT BY ND 6 YRS BY 026089  
REASON DFC (4)

CONFIDENTIAL

SPECIAL ORDER NO.  22	DATE  26 Jan 1966	HEADQUARTERS DEPARTMENT OF THE ARMY WASHINGTON D. C. 20310 <b>EXTRACT</b>  LCC/lbh
<p>25. TC 220. Fol rsg dir. WP. TDN. 2162010 01-3311-3312-3313-3314-3315-3316-3317 P1433 S99-999, 2172010 01-3311-3312-3313 3314-3315-3316-3317 P1433 S99-999.</p> <p>KAIL, SAMUEL G. 022072 COL Inf 1542 (2260) USA Elm Jt Spt Gp (SD-7707) WashDC w/dy sta Miami, Florida 33168</p> <p>Asg to: Hq, Fourth US Army (LA-4000) Ft Sam Houston, Tex. 78234</p> <p>Aloc: Jul-2-A-8.1</p> <p>Rept date: 15 Jul 66</p> <p>Lv data: 15 DALVP</p> <p>PCS(MDC): 3D</p> <p>EDCSA: 1 Jul 66</p>		
<p align="center">BY ORDER OF THE SECRETARY OF THE ARMY:</p> <div style="display: flex; justify-content: space-between;"> <div data-bbox="341 1789 683 1886"> <p>Attended:</p> <p><b>J. C. LAMBERT,</b> Major General, United States Army, The Adjutant General</p> </div> <div data-bbox="1007 1757 1281 1832"> <p><b>HAROLD K. JOHNSON,</b> General, United States Army, Chief of Staff.</p> </div> </div>		



5 August 1963

Agency 201 File

MEMORANDUM FOR: Col Samuel G. Kail

SUBJECT: Letter of Appreciation

1. The attached is forwarded for your retention.  
Congratulations!

2. I have mimeographed the two letters and if you will send me your indorsement with a list of names of people you desire to receive this commendation, I will prepare the individual indorsements, sending the originals to you for signature and dissemination and retaining all other copies for inclusion in TAG and 201 files.

3. I sent these to General Carter and Contacts for their information prior to forwarding to you.

FRANCIS A. SANTANGELO  
Lt Col, Inf  
Chief, AB/MMPD

Enclosure  
Ltr of Appreciation

Distribution:

Orig. & 1 - Add  
1 - C/MMPD  
1 - Agency 201 File  
1 - Suspense File

UNITED STATES ARMY  
THE CHIEF OF STAFF

29 July 1963

SUBJECT: Letter of Appreciation

THRU: Commander  
United States Army Element  
Joint Support Group  
Washington 25, D. C.

TO: Colonel Samuel G. Kall  
United States Army Element  
Joint Support Group  
Room 1B945, The Pentagon  
Washington 25, D. C.

1. It is with great pleasure that I forward the inclosed memorandum from the General Counsel commending you and your staff on your outstanding work in support of our Cuban effort. To the foregoing, I wish to add my personal thanks for your noteworthy performance of duty.

2. It is requested that this correspondence be passed on to those individuals concerned on your staff and that copies be placed in their official files.

3. Copies of this correspondence have been placed in your official files.

1 Incl  
as

EARLE G. WHEELER  
General, United States Army  
Chief of Staff

14-00000  
29 July 1963

**SUBJECT:** Letter of Appreciation

**THRU:** Commander  
United States Army Element  
Joint Support Group  
Washington 25, D. C.

**TO:** Colonel Samuel G. Kail  
United States Army Element  
Joint Support Group  
Room 1B945, The Pentagon  
Washington 25, D. C.

1. It is with great pleasure that I forward the inclosed memorandum from the General Counsel commending you and your staff on your outstanding work in support of our Cuban effort. To the foregoing, I wish to add my personal thanks for your noteworthy performance of duty.

2. It is requested that this correspondence be passed on to those individuals concerned on your staff and that copies be placed in their official files.

3. Copies of this correspondence have been placed in your official files.

Signed - Earle G. Wheeler

1 Incl  
as

EARLE G. WHEELER  
General, United States Army  
Chief of Staff

OFFICE OF THE CHIEF OF STAFF  
U. S. ARMY  
WASHINGTON 25, D.C.

July 18, 1963

MEMORANDUM FOR THE CHIEF OF STAFF, U. S. ARMY

SUBJECT: ACSI Collection Activities

A recent field trip to the Miami area by two representatives of my office (Lieutenant Colonel James K. Patchell and his replacement, Lieutenant Colonel Alexander M. Haig) has confirmed the high state of efficiency of the Army's intelligence collection activities in the Miami area. My own past observations, which have been reinforced by the foregoing trip, are that Colonel Samuel G. Kail, 022072, and his staff should be commended on their outstanding work in support of our Cuban effort. Particularly noteworthy is the fine working relationship Colonel Kail has established with the CIA Representative under whose overall supervision the Army element functions.

Please convey my personal appreciation to Colonel Kail and his staff for their continuing support.

*Joseph A. Califano, Jr.*  
Joseph A. Califano, Jr.  
General Counsel

14-00000  
CIA INTERNAL USE ONLY

31 July 1963

MEMORANDUM FOR: Deputy Director of Central Intelligence  
ATTENTION: Mr Berkaw, 7D-6011, Hqs Bldg  
SUBJECT: Letter of Appreciation - Col Samuel G. Kail

1. Forwarded for information of Deputy Director of Central Intelligence.
2. Please return to Army Branch, MMPD.

*F. A. Santangelo*  
F. A. SANTANGELO  
Lt Col, Inf  
Chief, AB/MMPD

Enclosure  
Ltr of Appreciation

*100-1-1001*  
*Aug 1963*

CIA INTERNAL USE ONLY

# STATEMENT OF PERSONAL HISTORY

INSTRUCTIONS: Read the certification at the end of this questionnaire before entering the required data. Print or type all answers. All questions and statements must be completed. If the answer is "None" so state. Do not mistake or omit material, act since the statements made herein are subject to verification. If more space is needed, use the Remarks section, item 20, and attach additional sheets, if necessary. The information entered hereon is for official use only and will be maintained in confidence.

1. (Print) FIRST NAME MIDDLE NAME MAIN NAME (If any) LAST NAME <b>Samuel Goodhue Nail</b>		2. STATUS <input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOWED	
3. ALIAS(ES) (SURNAME(S) OR CHANGE(S) IN NAME (Other than by marriage)) <b>None</b>		4. PERMANENT MAILING ADDRESS <b>318 Alado Ave., Coral Gables, Fla. 33134</b>	
5. DATE OF BIRTH (Day, month, year) <b>7 June 1915</b>		6. PLACE OF BIRTH (City, County, State, and Country) <b>Huntington, Cabell, West Virginia, USA</b>	
7. RACE <b>White</b>	8. HEIGHT <b>5'11"</b>	9. WEIGHT <b>170</b>	10. COLOR OF EYES <b>Blue</b>
11. COLOR OF HAIR <b>Brown</b>		12. SCARS, PHYSICAL DEFECTS <b>Diagonal scar, left eyebrow</b>	
13. DO YOU HAVE A HISTORY OF MENTAL OR PHYSICAL DISORDER? NARCOTICS OR BARBITURATES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO ARE YOU NOW OR HAVE YOU EVER BEEN ADDICTED TO THE USE OF DRUGS SUCH AS ANSWER TO ANY OF THE ABOVE IS YES, EXPLAIN IN ITEM 20. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF THE			
14. U.S. CITIZEN <input checked="" type="checkbox"/> NATIVE <input type="checkbox"/> ALIEN IF NATURALIZED CERTIFICATE NO. <input type="checkbox"/> IF DERIVED PARENTS CERTIFICATE NO. <input type="checkbox"/>		15. DATE, PLACE, AND COUNTRY <b>11 Jun 1939</b>	
16. MILITARY SERVICE ARE YOU PRESENTLY ON ACTIVE DUTY IN THE U.S. ARMED FORCES DRAWING FULL PAY? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, COMPLETE THE FOLLOWING GRADE AND SERVICE NO. <b>Colonel C-22072</b> SERVICE AND COMPONENT <b>USA - Inf</b> ORGANIZATION AND STATION <b>USA KIST, JT SUP OP (SD-7700)</b> DATE OF LAST ACTIVE SERVICE STARTED <b>11 Jun 1939</b>			
17. ARE YOU PRESENTLY A MEMBER OF A U.S. RESERVE OR NATIONAL GUARD ORGANIZATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES, COMPLETE THE FOLLOWING GRADE AND SERVICE NO. <input type="checkbox"/> SERVICE AND COMPONENT <input type="checkbox"/> ORGANIZATION AND STATION OR UNIT AND LOCATION <input type="checkbox"/>			
18. HAVE YOU PREVIOUSLY SERVED TOURS OF EXTENDED ACTIVE DUTY DRAWING FULL PAY FROM WHICH YOU WERE DISCHARGED OR SEPARATED TO CIVILIAN STATUS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES, COMPLETE THE FOLLOWING COUNTRY <input type="checkbox"/> SERVICE <input type="checkbox"/> COMPONENT <input type="checkbox"/> FROM (Date) <input type="checkbox"/> TO (Date) <input type="checkbox"/> TYPE DISCHARGE OR SEPARATION <input type="checkbox"/> GRADE AND SERVICE NO. <input type="checkbox"/>			
19. EDUCATION (Account for all civilian schools and military academies. Do not include service schools) MONTH AND YEAR <input type="checkbox"/> FROM <input type="checkbox"/> TO <input type="checkbox"/> NAME AND LOCATION OF SCHOOL <input type="checkbox"/> GRADUATE <input type="checkbox"/> DEGREE <input type="checkbox"/>			
1921-1930		Grade School and Jr. High - Huntington, W.Va. <input checked="" type="checkbox"/> Acad	
1930-1933		Huntington High School - Huntington, W.Va. <input checked="" type="checkbox"/> Acad	
1933-1934		Marshall College - Huntington, W.Va. <input checked="" type="checkbox"/> Acad	
Sep 1934-Mar 1935		Millard's West Point Prep, Washington, D.C. <input checked="" type="checkbox"/> Acad	
Mar 1935-Jun 1935		Marshall College - Huntington, W.Va. <input checked="" type="checkbox"/> Acad	
1935-1939		USA, West Point, New York <input checked="" type="checkbox"/> B.S.	
20. FAMILY (List in order given: parents, spouse, guardians, stepparents, foster parents, parents-in-law, former spouses, etc.) (If deceased give date and place) children, brothers and sisters, even though deceased. Include any others you resided with or with whom a close relationship existed or exists. If the person is not a U.S. citizen by birth, give date and port of entry, alien registration number, naturalization certificate number and place of issuance.)			
RELATION AND NAME		DATE AND PLACE OF BIRTH	
FATHER <b>Ira Jacob Nail</b>		<b>Aug 1882, Upper Sandusky, Ohio DECEASED</b>	
MOTHER (Maiden name) <b>Marilla Marie Davis</b>		<b>1 Jul 1885, Gallipolis, Ohio DECEASED</b>	
SPOUSE (Maiden name) <b>Mary Margaret Davis</b>		<b>18 Jun 16, Dallas, Texas 318 Alado Ave, Coral Gables, Fla. X</b>	
OTHER (Specify) <b>Brother: Ira Joseph Nail</b>		<b>12 Oct 1917, Huntington, W.Va. 2012 Burks St., Petersburg, Va. X</b>	
<b>Sister: Mary Marilla Nail Wolfe</b>		<b>18 Sep 25, Huntington, W.Va. 4306 Chestnut St., Bethesda, Md. X</b>	
<b>Son: Samuel G. Nail, Jr.</b>		<b>21 Jul 43, Dallas, Tex. 318 Alado Ave, Coral Gables, Fla. X</b>	
<b>Son: Robert G. Nail</b>		<b>7 Oct 48, San Juan, Puerto Rico " " " " " X</b>	
<b>Daughter: Anna Marilla Nail</b>		<b>13 Jul 55, Ft. Leavenworth, Kans. " " " " " X</b>	

DD FORM 1 MAY 55 398

PREVIOUS EDITIONS ARE OBSOLETE

Exception to Standard Form 10 Approved by Bureau of the Budget June 1960

# STATEMENT OF PERSONAL HISTORY

LIST ALL RESIDENCES FROM 1 JANUARY 1937				
MONTH AND YEAR		STREET AND NUMBER	CITY	STATE OR COUNTRY
FROM	TO			
Jul 35	11 Jan 39	UECC	West Point	New York
Jan 39	Exp 39	Poa Ridge Road	Huntington	West Virginia
Sep 39	Nov 39	Ricardo Apts, Maple Ave.	Dallas	Texas
Nov 39	Jul 42	25th Inf Regt	Ft. Huachuca	Arizona
Jul 42	Jan 43	405 Jefferson St.	Alexandria	Virginia
Jan 43	Apr 43	C. & OGC	Ft. Leavenworth	Kansas
Apr 43	Nov 43	McLean Gardens	Washington, D.C.	
Nov 43	Dec 44	2400 Cameron Hills Rd.	Alexandria	Virginia
Jan 45	Aug 45	EUROPE 13th Arm Div.		
Aug 45	Jan 46	Pine Needle Inn	Northwestern Plains	North Carolina
Jan 46	May 46	Leak Street	"	"
May 46	Jan 49	IDEARE, Antillas,	San Juan	Puerto Rico

Jan 49	-	Apr 49	-	4263 Bordeaux	Dallas	Texas
Apr 49	-	Aug 50	-	71 Chancellorsville	Ft. Devens	Mass.
Aug 50	-	Nov 51	-	7th Inf Regt		Japan & Korea
Nov 51	-	Jan 52	-	6363 Bordeaux	Dallas	Texas
Jan 52	-	Aug 53	-	79 Orchard Drive	Leviston	New York
Aug 53	-	Jan 54	-	45, Stanvix Apts.	Carlisle	Penn.
Jul 54	-	Jun 57	-	604 Scott	Ft. Leavenworth	Kansas
Jun 57	-	Sep 57	-	4208 Vacation Lane	Arlington	Virginia
Oct 57	-	May 58	-	2937 Forrest Hill Blvd.	Pacific Grove	California
Jun 58	-	Jan 61	-	5 American Embassy	Havana	Cuba
Feb 61	-	Apr 61	-	701 Navarro	Coral Gables	Fla.
Apr 61	-	Feb 62	-	412 General Plaza	Ft. Dix	New Jersey
Feb 62	-	Jul 62	-	44, Granada Club Apts	Coral Gables	Fla.
Jul 62	-	Present	-	318 Aleo Ave.	Coral Gables	Fla.

<input checked="" type="checkbox"/>	OR VIOLENCE TO DENY OTHER PERSONS THEIR RIGHTS UNDER THE CONSTITUTION OF THE UNITED STATES OR WHICH SEEMS TO ALTER THE FORM OF GOVERNMENT OF THE UNITED STATES BY UNCONSTITUTIONAL MEANS?
<input checked="" type="checkbox"/>	ARE YOU NOW OR HAVE YOU EVER BEEN AFFILIATED OR ASSOCIATED WITH ANY ORGANIZATION OF THE TYPE DESCRIBED ABOVE AS AN AGENT, OFFICIAL, OR EMPLOYEE?
<input checked="" type="checkbox"/>	ARE YOU NOW ASSOCIATING WITH OR HAVE YOU ASSOCIATED WITH ANY INDIVIDUALS INCLUDING RELATIVES WHO YOU KNOW OR HAVE REASON TO BELIEVE ARE OR HAVE BEEN MEMBERS OF ANY OF THE ORGANIZATIONS IDENTIFIED ABOVE?
<input checked="" type="checkbox"/>	HAVE YOU EVER ENGAGED IN ANY OF THE FOLLOWING ACTIVITIES OF ANY ORGANIZATION OF THE TYPE DESCRIBED ABOVE: CONTRIBUTION(S) TO ATTENDANCE AT OR PARTICIPATION IN ANY ORGANIZATIONAL SOCIAL OR OTHER ACTIVITIES OF SAID ORGANIZATIONS OR OF ANY PROJECTS SPONSORED BY THEM; THE SALE, GIFT OR DISTRIBUTION OF ANY WRITTEN, PRINTED OR OTHER MATTER PREPARED, REPRODUCED OR PUBLISHED BY THEM OR ANY OF THEIR AGENTS OR INSTRUMENTALITIES?
IF "YES" DESCRIBE THE CIRCUMSTANCES. ATTACH ADDITIONAL SHEETS FOR A FULL ENLARGED STATEMENT. IF ASSOCIATED WITH ANY OF THE ABOVE ORGANIZATIONS SPECIFY NATURE AND EXTENT OF ASSOCIATION WITH EACH INCLUDING OFFICE OR POWER HELD. ALSO INCLUDE DATES, PLACES AND CREDENTIALS NOW OR FORMERLY HELD. IF ASSOCIATIONS HAVE BEEN WITH INDIVIDUALS WHO ARE MEMBERS OF THE ABOVE ORGANIZATIONS, LIST THE INDIVIDUALS AND THE ORGANIZATIONS WITH WHICH THEY WERE OR ARE AFFILIATED.	
NOT APPLICABLE	
18 HAVE YOU EVER BEEN DETAINED, HELD, ARRESTED, INCARCERATED OR SUMMONED INTO COURT AS A DEFENDANT IN A CRIMINAL PROCEEDING OR CONVICTED, FINED OR IMPRISONED OR PLACED ON PROBATION OR HAVE YOU EVER BEEN ORDERED TO DEPORT OR EXILE OR COLLATERAL FOR THE VIOLATION OF ANY LAW, POLICE REGULATION OR ORDINANCE (including minor traffic violations for which a fine or forfeiture of \$25. or less was imposed)? INCLUDE ALL COURT MARTIALS WHILE IN MILITARY SERVICE. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF "YES" LIST THE DATE, THE NATURE OF THE OFFENSE OR VIOLATION, THE NAME AND LOCATION OF THE COURT OR PLACE OF HEARING AND THE PENALTY IMPOSED OR OTHER DISPOSITION OF EACH CASE.	

10 ARE THERE ANY INCIDENTS IN YOUR LIFE NOT MENTIONED ABOVE WHICH MAY REFLECT UPON YOUR LOYALTY TO THE UNITED STATES OR YOUR ABILITY TO PERFORM THE DUTIES WHICH YOU MAY BE CALLED UPON TO TAKE ON WHICH MIGHT REQUIRE FURTHER EXPLANATION? ☐ YES ☒ NO IF YES, GIVE DETAILS

20 REMARKS

~~SECRET~~

I have had a security clearance of one type/degree or another throughout all but the very early years of my Military Career. At the present time I have a TOP SECRET Security Clearance from Department of Army, and also a high level security clearance from CIA. The type or degree of clearance by CIA I do not know.

I CERTIFY THAT THE ENTRIES MADE BY ME ABOVE ARE TRUE, COMPLETE, AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AND ARE MADE IN GOOD FAITH. I UNDERSTAND THAT A KNOWING AND WILLFUL FALSE STATEMENT ON THIS FORM CAN BE PUNISHED BY FINE OR IMPRISONMENT OR BOTH (See U. S. Code, title 18, section 1001)

DATE 23 July 1965	SIGNATURE OF PERSON COMPLETING FORM <i>Gus C. Guerrero</i>
TYPED NAME AND ADDRESS OF WITNESS Gus C. Guerrero, P.O. Box 657, Coral Gables, Fla.	SIGNATURE OF WITNESS <i>Gus C. Guerrero</i>

21 THIS SECTION TO BE COMPLETED BY AUTHORITY REQUESTING INVESTIGATION  
BRIEF DESCRIPTION OF DUTY ASSIGNMENT AND DEGREE OF CLASSIFIED MATTER (top secret, secret, etc.) TO WHICH APPLICANT WILL REQUIRE ACCESS

RECORD OF PRIOR CLEARANCES		
DATE OF CLEARANCE	TYPE OF CLEARANCE	AGENCY THAT COMPLETED INVESTIGATION

REMARKS

# STATEMENT OF PERSONAL HISTORY

INSTRUCTIONS. Read the certification at the end of this questionnaire before entering the required data. Print or type all answers. All questions and statements must be completed. If the answer is "None," so state. Do not misstate or omit material. Act since the statements made herein are subject to verification. If more space is needed, use the Remarks section, item 20, and attach additional sheets if necessary. The information entered hereon is for official use only and will be maintained in confidence.

1 (Print) FIRST NAME MIDDLE NAME MAIDEN NAME (If any) LAST NAME <b>Samuel Goodhue Nail</b>				2 STATUS <input type="checkbox"/> CIVILIAN <input checked="" type="checkbox"/> MILITARY OR ACTIVE DUTY	
3 ALIAS(ES) NICKNAME(S) OR CHANGE(S) IN NAME (Other than by marriage) <b>None</b>				4 PERMANENT MAILING ADDRESS <b>318 Alado Ave., Coral Gables, Fla. 33134</b>	
5 DATE OF BIRTH (Day, month, year) <b>7 June 1913</b>		6 PLACE OF BIRTH (City, County, State, and Country) <b>Huntington, Cabell, West Virginia, USA</b>		7 PLACE CERTIFICATE RECORDED <b>Cabell County Court House, Huntington, W. Va.</b>	
8 RACE <b>White</b>	9 HEIGHT <b>5'11"</b>	10 WEIGHT <b>170</b>	11 COLOR OF EYES <b>Blue</b>	12 COLOR OF HAIR <b>Brown</b>	13 SCARS, PHYSICAL DEFECTS <b>Diagonal scar, left eyebrow</b>
14 DO YOU HAVE A HISTORY OF MENTAL OR NERVOUS DISORDERS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO ARE YOU NOW OR HAVE YOU EVER BEEN ADMITTED TO THE USE OF HABIT FORMING DRUGS SUCH AS NARCOTICS OR BARBITURATES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO ARE YOU NOW OR HAVE YOU EVER BEEN A CHAMPION USER OF TOBACCO OR ALCOHOLIC BEVERAGES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF THE ANSWER TO ANY OF THE ABOVE IS "YES," EXPLAIN IN ITEM 20.					
15 U.S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		16 NATIVE IF NATURALIZED CERTIFICATE NO.		17 IF DERIVED PARENTS CERTIFICATE NO.	
18 ALIEN <input type="checkbox"/>		19 REGISTRATION NO.		20 DATE PLACE AND COURT	
21 MILITARY SERVICE					
22 ARE YOU PRESENTLY ON ACTIVE DUTY IN THE U.S. ARMED FORCES DRAWING FULL PAY? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, COMPLETE THE FOLLOWING					
23 GRADE AND SERVICE NO. <b>Colonel C-22072</b>		24 SERVICE AND COMPONENT <b>USA - Inf</b>		25 ORGANIZATION AND STATION <b>The Pentagon, Room 1B-045, 1200 Jefferson Davis Highway, Arlington, Va.</b>	
26 ARE YOU PRESENTLY A MEMBER OF U.S. RESERVE OR NATIONAL GUARD ORGANIZATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES, COMPLETE THE FOLLOWING					
27 GRADE AND SERVICE NO.		28 SERVICE AND COMPONENT		29 ORGANIZATION AND STATION OR UNIT AND LOCATION	
30 HAVE YOU PREVIOUSLY SERVED TOURS OF EXTENDED ACTIVE DUTY DRAWING FULL PAY, FROM WHICH YOU WERE DISCHARGED OR SEPARATED TO CIVILIAN STATUS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES, COMPLETE THE FOLLOWING					
31 COUNTRY		32 SERVICE		33 COMPLAINT FROM (Date) TO (Date) TYPE OF CHANGE OR SEPARATION—GRADE AND SERVICE NO.	
34 EDUCATION (Account for all civilian schools and military academies. Do not include service schools)					
35 MONTH AND YEAR		36 NAME AND LOCATION OF SCHOOL		37 GRADUATE	
38 FROM TO		39		40 DEGREE	
1921 1930		Grade School and Jr. High - Huntington, W. Va.		<input checked="" type="checkbox"/> X	
1930 1933		Huntington High School - Huntington, W. Va.		<input checked="" type="checkbox"/> X	
1933 1934		Marshall College - Huntington, W. Va.		<input checked="" type="checkbox"/> X	
1934 1935		Millard's West Point Prep, Washington, D.C.		<input checked="" type="checkbox"/> X	
1935 1935		Marshall College - Huntington, W. Va.		<input checked="" type="checkbox"/> X	
1935 1939		USMA, West Point, New York		<input checked="" type="checkbox"/> X	
41 FAMILY (List in order given, parents, spouse, guardians, stepparents, foster parents, parents-in-law, former spouses) (If divorced give date and place) children, brothers and sisters, even though deceased. Include any others you resided with or with whom a close relationship existed or exists. If the person is not a U.S. citizen by birth, give date and port of entry, alien registration number, naturalization certificate number and place of issuance.)					
42 RELATION AND NAME		43 DATE AND PLACE OF BIRTH		44 PRESENT ADDRESS IF LIVING	
45 FATHER		46		47 U.S. CITIZEN	
Ira Jacob Nail		4 Aug 1882, Upper Sandusky, Ohio		DECEASED	
48 MOTHER (Maiden name)		49		50	
Marilla Maria Boye		1 Jul 1885, Gallipolis, Ohio		DECEASED	
51 SPOUSE (Maiden name)		52		53	
Mary Margaret Davis		18 Jun 16, Dallas, Texas		318 Alado Ave, Coral Gables, Fla.	
54 OTHER (Specify)		55		56	
Brother:		57		58	
Ira Joseph Nail		22 Oct 1917, Huntington, W. Va.		2012 Barks St., Petersburg, Va.	
59 Sister:		60		61	
Mary Marilla Nail		18 Sep 25, Huntington, W. Va.		4306 Chestnut St., Bethesda, Md.	
62 Son:		63		64	
Samuel G. Nail, Jr.		21 Jul 43, Dallas, Tex.		318 Alado Ave, Coral Gables, Fla.	
65 Son:		66		67	
Robert G. Nail		7 Oct 48, San Juan, Puerto Rico		"	
68 Daughter:		69		70	
Anna Marilla Nail		13 Jul 55, Ft. Leavenworth, Kans.		"	

DD FORM 398

PREVIOUS EDITIONS ARE OBSOLETE

Revised by Department of Defense, 1954  
Approved by Bureau of the Budget, June 1954